PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

			Attorney Docket Number		5034-103 US	
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	First Named Inventor	•	Halas, Paul			
PATENT APPLICATION		COMPLETE IF KNOWN				
		Application Number TBA/				
		Filing Date	Her	ewith		
	Filing (surcharge (37 CFR 1.16 (e))	Group Art Unit	TBA	TBA		
		Examiner Name	TBA	\		

As a below named inventor, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Corner Molding Cap System								
the specification of which (Title of the Invention)								
☑ is attached hereto								
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International								
Application Number and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached?				
Number(s)	Country	(MM/DD/YYYY) Country	Not Claimed	YES	NO			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless It contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application Direct all correspondence to: Customer ondance address below or Bar Cod Name PATENT TRADEMARK OFFICE **Address** ZIP State City Fax Country Telephone I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Family Name Halas Given Name or Surname (first and middle [if any]) Inventor's 7-29-2003 Signature NJ **United States** USA Cranbury Citizenship State Country Residence: City 3 Brainerd Drive **Mailing Address** NJ 08512-3128 **United States** Cranbury Zip Country State City NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name Family Name or Surname (first and middle [if any]) Inventor's Date Signature Citizenship Residence: City State Country **Mailing Address** City State Zip Country

Additional inventors are being named on the

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box \longrightarrow

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid QMB control number.

	Applicati n Number	ТВА	
	Filing Date	H rewith	
POWER OF ATTORNEY OR	First Named Inventor	Halas, Paul	
AUTHORIZATION OF AGENT	Group Art Unit	ТВА	
	Examiner Name	ТВА	
	Attorney Docket Number	5034-103 US	

I hereby a	ppoint:						
☑ Practitioners at Customer Number 26817							
OR □ Practitioner(s) named below: 26817							
Name			_	R.	PATENT '	TRADEMARK OFFICE	
		<u> </u>					ľ
i i		· <u>-</u> · · · · · · · · · · · · · · · · · · ·					
		·····			· · · · · · · · · · · · · · · · · · ·		
as mylour a	ittomev(s)	or agent(s) to pros	ecute the application	identified	above, and to	ransact all	business in the Patent and
		ected therewith.	Costo tijo application	100/14/100	22010, 22 13		
Please ch	ange the co	orrespondence ad	dress for the above-le	dentified a	ipplication to:		
l	-	oned Customer N				Place Cu	ustomer
OR			Bar Code				
Practition OR	oners at Cu	stomer Number				Label he	118
☐ Firm or							
Individu Address	al Name						
Address							
City				State		ZIP	
Country				Gioto		1-11	· · · · · · · · · · · · · · · · · · ·
Telephone				Fax			
I am the:		l <u> </u>			····		
Applicant/Inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71.							
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
SIGNATURE of Applicant or Assignee of Record							
Name	Paul Ha	Paul Halas					
Signature	Mul Halas						
Date 12-29-2003							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
✓ *Total of 1 forms are submitted.							

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.